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## BIB DATA SHEET

CONFIRMATION NO. 8813

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/929,236	08/13/2001	144	3724	SDT 307
RULE				
<b>APPLICANTS</b> Stephen F. Gass, Wilsonville, OR; David S. D'Ascenzo, Portland, OR; Andrew L. Johnston, Redwood City, CA; Joel F. Jensen, Redwood City, CA; Sung H. Kim, Palo Alto, CA; Anwyl M. McDonald, Palo Alto, CA;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/225,056 08/14/2000 and claims benefit of 60/225,057 08/14/2000 and claims benefit of 60/225,058 08/14/2000 and claims benefit of 60/225,059 08/14/2000 and claims benefit of 60/225,089 08/14/2000 and claims benefit of 60/225,094 08/14/2000 and claims benefit of 60/225,169 08/14/2000 and claims benefit of 60/225,170 08/14/2000 and claims benefit of 60/225,200 08/14/2000 and claims benefit of 60/225,201 08/14/2000 and claims benefit of 60/225,206 08/14/2000 and claims benefit of 60/225,210 08/14/2000 and claims benefit of 60/225,211 08/14/2000 and claims benefit of 60/225,212 08/14/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 09/14/2001				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/GHASSEM ALIE/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance Trials	<b>STATE OR COUNTRY</b> OR	<b>SHEETS DRAWINGS</b> 9	<b>TOTAL CLAIMS</b> 19
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> SD3, LLC 9564 S.W. Tualatin Road Tualatin, OR 97062 UNITED STATES				
<b>TITLE</b> Replaceable brake mechanism for power equipment				
<b>FILING FEE</b>	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)		

<b>RECEIVED</b> 355	No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> 1.18 Fees (Issue)
	No. _____ for following:	<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit